



## BUILDING & NEIGHBORHOOD SERVICES

**Phone 615-794-7012**

**Franklin, Tennessee**

**Fax 615-591-9066**

### Non Residential Building Permit Application

revised 4/7/10

Owner/Applicant: \_\_\_\_\_

Address: \_\_\_\_\_ Contact Person: \_\_\_\_\_

City: \_\_\_\_\_ E-Mail: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Contractor: \_\_\_\_\_ State License #: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Project Name: \_\_\_\_\_

Project Street Address: \_\_\_\_\_ Suite #: \_\_\_\_\_

Project Lot Number: \_\_\_\_\_ Section #: \_\_\_\_\_ Subdivision: \_\_\_\_\_

Occupancy Use Classification: \_\_\_\_\_ Former Use: \_\_\_\_\_

Total Square Footage: \_\_\_\_\_ Stories: \_\_\_\_\_ Basement: \_\_\_\_\_ Height: \_\_\_\_\_

Construction Cost: \_\_\_\_\_ WITHIN FLOODPLAIN: ☐ Yes ☐ No

4 Sets Plans (Required): ☐ Yes ☐ No Spec Book: ☐ Yes ☐ No

Design Firm: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Designer of Record or Contact: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email: \_\_\_\_\_

This application is not officially accepted unless accompanied by official plans.

Contractors applying for permits of projects with contract value of \$25,000 or more will be required to have a proper Tennessee State Contractor's License valid for amount of value and in field of work to be done. A certificate of insurance is also required.

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

### CONSTRUCTION TYPE:

☐ NEW\* \_\_\_\_\_

☐ TENANT BUILDOUT

☐ OTHER

☐ ADDITION

☐ RENOVATION

**\* Plan review number established by Planning department when plans were submitted for Planning Commission approval. This is a required field.**